

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	1644
CD-ROM or CD-R?::	Yes
Number of CD disks::	1
Number of copies of CDs::	1
Sequence submission?::	Yes
Computer Readable Form (CRF)?::	Yes
Title::	USE OF B7-H3 TO INHIBIT LYMPHOCYTE PROLIFERATION
Attorney Docket Number::	WYS-00501
Total Drawing Sheets::	8
Small Entity?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Vincent
Family Name::	Ling
City of Residence::	Walpole
State or Province of Residence::	MA
Country of Residence::	US
Street of mailing address::	19 Forsythia Drive
City of mailing address::	Walpole
State or Province of mailing address::	MA
Postal or Zip Code of mailing address::	02081

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Beatriz  
Middle Name:: M.  
Family Name:: Carreno  
City of Residence:: Clayton  
State or Province of Residence:: MO  
Country of Residence:: US  
Street of mailing address:: 11 Dartford Avenue  
City of mailing address:: Clayton  
State or Province of mailing address:: MO  
Postal or Zip Code of mailing address:: 63105

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Mary  
Family Name:: Collins  
City of Residence:: Natick  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 54 Rathburn Road  
City of mailing address:: Natick  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 01760

**Correspondence Information**

Correspondence Customer Number:: 58571

**Representative Information**

Representative Customer Number:: 58571

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Claiming Benefit Under 35 USC 119(e)	60/463,342	04/17/2003

**Assignee Information**

Assignee name:: Wyeth  
Street of mailing address:: 87 CambridgePark Drive  
City of mailing address:: Cambridge  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02140